

Best Available Copy

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)						SERIAL NO. 09/857821		FILING DATE 05 SEP 2001	
						APPLICANT(S) <i>Bruenle</i>			
CLAIMS									
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.
1							51		
2							52		
3							53		
4							54		
5							55		
6							56		
7							57		
8							58		
9							59		
10							60		
11							61		
12							62		
13							63		
14							64		
15							65		
16							66		
17			/				67		
18			/	/			68		
19			/	/			69		
20			/	/			70		
21			/	/			71		
22			/	/			72		
23			/	/			73		
24			/	/			74		
25			/	/			75		
26			/	/			76		
27			/	/			77		
28			/	/			78		
29			/	/			79		
30			/	/			80		
31			/	/			81		
32			/	/			82		
33							83		
34							84		
35							85		
36							86		
37							87		
38							88		
39							89		
40							90		
41							91		
42							92		
43							93		
44							94		
45							95		
46							96		
47							97		
48							98		
49							99		
50							100		
TOTAL IND.			2				TOTAL IND.		
TOTAL DEP.			14				TOTAL DEP.		
TOTAL CLAIMS			16				TOTAL CLAIMS		